

MAY 23RD TESTIMONY FOR THE HOOVER COMMISSION

By: Tom Aswad

The reinstatement of mandatory County Advisory Boards as they were prior to 1991 and the formation of a Statewide Advisory Board that will include a strong voice for people in recovery: I will be sharing the ways in which our County has benefited from having a County Alcohol and Other Drugs Advisory Board.

Some actions would be:

1. The name of the Board was changes itself, and the name of the entire division which acknowledges that alcohol is a drug and thus removing a soft term such as substance abuse.
2. Successful Advocacy for treatment expansion of youth and adult residential services.
3. Educated the Board of Supervisors regarding Proposition 36, which resulted in a change of direction of a negative recommendation to oppose the initiative.
4. Gave the formation which provided an avenue for a consumer group (Partners In Recovery Alliance) to make sure that they are part of the decision making processes. Once the Federal grant ran out to organize consumers we helped facilitate funding for their continuation.
5. Reintroduction of Narcotic Anonymous meetings in county jails.
6. Educated the public and the Board of Supervisors in regards to the benefits of needle exchange.
7. Advocated for some of the most progressive use of Proposition 10 funding in the state.

At the same level the formation and make up of such a board would be an evolutionary process. Some ideas for an inclusive board would be including the following: Representation from county advisory boards from rural, small, and large counties. Members from the following organizations, Department of Alcohol and Drug Programs, California Association of Drug Programs Executives, County Alcohol and Drug Program Administrators Association of California, California Association of Alcohol Recovery Homes. Representation from Political and law enforcement (prevention oriented). The board most importantly must have representation from the recovery community at every level that have vested and non-vested interests (volunteers). The Board will have geographical representation and be inclusive.

Mandate publicly funded treatment programs to include long-term aftercare components and proper recovery support services. If they are not in place we are wasting our money. This does not necessarily mean increasing treatment time but putting the proper services in place.

Some actions would be:

1. Basic life skills such as job training and job retention, parenting, shopping, navigate the system, health care, and financial training.
2. Child care for women.
3. Family intervention, now that people are in recovery the focus should be moved from me to we. Reunification with the children.
4. Transitional and sober living. Advocate for section 8 housing to be set-aside for people coming out of sober living. More programs like our Housing Initiative (see sober housing handbook).
5. I will be sharing my own personal story.